DISCLOSURE OF LOBBYING ACTIVITIES

Approved by Chi 0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352 (See reverse for public burden disclosure.)

	I. Type of Federal Action:	9 60-1	4 4 4	
ı	a. contract	2. States of Fode		3. Report Type:
1	b. grant	b. initial	er/application	a. Initial filing b. material change
	c. cooperative agreement d. loan	C. Post-av		For Material Change Only:
1	e. Ioan guarantee			year quarter
┝	1. Ioan insurance			date of last report
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6	Federal Department/Agency:			Istrict, if known:
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Reporting Entity:		Page	af

Authorized for Local Reproduction Standard Form - LLL-A

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Use the SFLLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

- Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
- 2. Identify the status of the covered Federal action.
- Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
- 4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient, identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
- If the organization filing the report in item 4 checks "Subawardee", then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
- Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
- 7. Enter the Federal program name or description for the covered Federal action (Item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
- Enter the most appropriate Federal identifying number available for the Federal action identified in Item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFF-DE-90-001."
- For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
- 10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influence the covered Federal action.
 - (b)Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
- 11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
- Check the appropriate box(es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
- 13. Check the appropriate box(es). Check all boxes that apply. If other, specify nature.
- 14. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered, include all preparatory and related activity, not just time spent in actual contact with Federal officials. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
- 15. Check whether or not a SF-LLL-A Continuation Sheet(s) is attached.
- 16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burden for this collection of information is estimated to average 30 minitures per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwerk Reduction Project (0344-040), Washington, D.C. 2000.

FEDERAL CONTRACTOR VETERANS' EMPLOYMENT REPORT VETS-100

OMB NO:1293-0005 Expires 04-30-2001

Persons are not required to respond to this collection of information unless it displays a valid OMB number

RETURN COMPLETED REPORT TO:

U.S. DEPARTMENT OF LABOR
VETERANS' EMPLOYMENT AND TRAINING SERVICE
VETS-100 REPORTING
6101 STEVENSON AVE
ALEXANDRIA, VA. 22304

TYPE OF CONTRACTOR

TYPE OF FORM (Check only one)

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Report the total meadmum and minimum number of regular employees on board during the period covered by this report. Maximum Number Minimum Number



FEDERAL CONTRACTOR VETERANS' EMPLOYMENT REPORT (VETS-100)

WHO MUST FILE

WYFO MUST FILE
The Vets-100 report is to be completed by all nonexampt federal contractors and subcontractors with contracts or subcontracts for the furnishing of supplies and services or the use of real or personal property for \$25,000, or more. Services include but are not limited to the following services: Utility, construction, transportation, research, insurance, and fund depository, transportive of whether the government is the purchaser or selent. The existence of \$25,000 or more in federal contracts or subcontracts during a given celendar year establishes the requirement to fite a VETS-100 Report during the following ce endar year.

WHEN TO FILE s annual report must be filed no later than September 30. Mail to the address pre-ned on the front of the form.

LEGAL BASIS FOR REPORTING REQUIREMENTS:
The 38, United States Code, Section 4212(d) and Pt. 108-339, require that lederal contractors report at least annually the numbers of: 1) special disabled veterans, 2) veterans of the Visinam era, and 3) other veterans who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized who are in their workforce. Reporting is required by hinting location and includes both the number employed and the number of new hires, within the three categories letter above. The number of waterna employed within these categories is to be broken out by job category and maximum and minimum total employment is to be reported as well.

HOW TO SUBMITTHE VETS-100 REPORTS
Single-establishment employers must file one completed form. All multi-establishment employers, i.e., those doing business at more than one hiring boaston, must file (A) one form covering the principal or insectionaries rolled: (B) a separate form to each hiring location employing 50 or more persons: and (C) ETHER, (I) a separate form for each hiring location employing sheer han 50 persons, OR (8) consolidated experts that cover hiring focations employing their has have fewer than 50 employees. Each state consolidated spoort must also tast the name said address of the hiring locations covered by the report. Commonity consolidated search such as flows manufact by ESC-1 inscrint procedures are NOT repulsed for the VETS-168 reseas. Completed reports for the headquesters location and all other hiring locations for each company should be mailed in one package to the address indicated on the front of the form.

RECORD KEEPING

Employers must keep copies of the completed annual VETS-100 report submitted to DOL for a period of two years.

HOW TO PREPARE THE FORMS

As VETS only sends one copy of the VETS-100 Reporting form to each headqueness location, multi-establishment employers submilling hard copy reports should produce facaimite copies of the headqueners form for reporting date on each location.

Type of Contractor Indicate the type of contractual relationship (prime contractor or subcontractor) that the organization has with the Federal Government. If the organization serves as both a prime contractor and a subcontractor on vertices fede contracts, check both boxes.

<u>Type of Form</u> If a reporting organization submits only one VETS-100 Report form for a single location, check the Single Establishment box. If the reporting organization submits more than one form, only one form should be checked as Multiple Establishment-Readquarters. The remeiting forms should be checked as either Multiple Establishment-firing Location or Multiple Establishment-State Consolidated. For state consolidated forms, the number of hiring locations included in that report should be entered in the space provided. For each form, only one loss should be checked within this block.

COMPANY IDENTIFICATION INFORMATION

Company Number: Do not change the Company Number that is printed on the form. If there are any questions regarding your Company Number, places call the VETS-100 staff at (703) 461-2460 or e-mail HELPDESK@VETS100.COM.

Twisher Month Pennet Enging Enter the and date for the hwelve month reparting period used as the basis for filing the VETS-100 Report. To determine this period, select a date in the current year between July 1 and August 31 that represents the end of a payroll pennet. That payroll pended will be the basis for reparting Nameter of Employees, as described below. Then the twishe month period preceding the end date of that payroll pended will be your twishe month period overend. This period is the besis for reporting New Hires, as described below. Any federal contractor or sebsciontector who has written approval from the Equal Employment Opportunity Commission to use December 31 as the ending date for the EGO-1 Report may also use that date as the ending date for the EGO-1 Report may also use that date as the

Name and Address for Single Establishment Employers COMPLETE the identifying information under the Parent Company name and address section. LEAVE BLANK all of the identifying information for the Hiring Location.

Hame and Address for Multi Establishment Emoloyers For perent company headquarters location, COMPLETE the name and address for the perent company headquarters. LEAVE BLANK the name and address of the Hintig Location. For his leastloss of a perent company, COMPLETE the name and address for the Perent Company location, COMPLETE the name and address for the Hiring Location.

SIC Code, DUNS Number, and Employer ID Number Single Establishment and Multi-Establishment Employers should COMPLETE the SIC Code, DUNS Number, and Employer ID Number as described below.

SiC Code Enter the four (4) digit SiC Code applicable to the hinng location for which the report is filed. If there is not a separate SiC Code for the hinng location, enter the SiC Code for the parent company.

<u>Dun, and Bradistant I.D. Number (DLBIS)</u> If the company or any of its establishments has a Dun and Bradistreet Identification Number, please enter the nine (t) digit number in the space previded. If there is a specific DUNS Number applicable to the hirting location for which the report is field, anier that DUNS Number. Otherwise, enter the DUNS number for the parent company.

Employer I.D. Number (EIN) Enter the nine (8) digit numbers assigned by the I.R.S. to the contractor. If there is a specific EIN applicable to the hiring locat for which the report is fited, enter that EIN. Otherwise, enter the EIN for the

INFORMATION ON VETERANS

historium of Emploress. Select any payroll period ending between July 1 and August 31 of the current year. Provide all dete for regular full-time and part-time employees who were special deabled vestrans, Vistrams-are vestrans, or other vestrans employed as of the ending date of the selected payroll period. Do not include employee as specifically exclused as indicated in 41 CPR 61-250.2(b)(2). Employees must be counted by vestran status for each of the mine occepational estegories (Lines 1-9) in columns L and M. Blank spaces will be considered zeros.

bias tites. Report the number of regular full-time and part-time employees by veteran status who were hired (both veterans and non-veterans) and who were included in the payrell for the first time during the 12-month period ending between July 1 through August 31 of the current year. The totals in columns O, P and R (Line 10) are required. Enter all applicable numbers, including zeroe.

Maximum himmum, Employees Report the maximum, and minimum number of regular employees on board during the period covered as indicated by Pt. 105-339

DEFINITIONS:

ons an establishment as defined at 41 CFR 61 250.2(b)

"Enachel Disabled Veterant" means (A) a veteran who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under leves administered by the Department of Veterant" Afters for a classifier, (I) rand at 30 persons or among, or (F) rated at 10 or 20 person in the case of a veteran who has been determined under Section 3106 of Title 38, U.S.C. to have a senous employment handlosp or (B) a person who was discharged or released from active duty because of a nerview-commented reliability.

"Malaram of the Vistnam-erz;" meens a person who: (A) served in the military, ground, nevel or all service of the United States on active duty for a period of more than 150 days, and twee discharged or releases thesetions with other than a dischargeable discharge, I any pair of such active duty occurred; (I) in the Republic of Vistnam between February 28, 1951, and May 7, 1975; or (i) between August 5, 1964, and May 7, 1975; or (ii) between August 5, 1964, and May 7, 1975, in all other cases; or only for a service-connected disability if any part of such active duty was performed (I) in the Republic of Vistnam between February 28, 1961, and May 7, 1975; or (ii) between August 5, 1964, and May 7, 1975, in all other cases.

Other Visionace resears veterans who served in the military, ground, navel or air service of the United States on active duty during a war or in a campaign or expedition for which a campaign bedge has been sutherized. To identify the compaigns or expeditions that make the crisiston, contact the Office of Personnel Management (OPM) and sait for the OPM VETS Guide, Appendix A. A local OPM telephone number may be found in the stephone book under Federal Government or consult Directory Assistance for your area code for the nearest OPM location. For those with Internet access, the influential needland to the determination also is eventable at https://doi.org/10.1009/10.0009/

Public reporting burden for this collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing delis source, gathering and maintening the data needed, and completing and reviewing the collection of information. Send comments reparding this burden estimate or any other aspect of this collection information, including suppositions for reducing the burden to the Department of Labor, Office of Information Information 1011, 200 Constitution Avenue, NW. Washington D.C. 20210. All completed VETS-100 Reports should be sent to the address indicated on the form.

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	SMALL DISADVANTAGED (SDB) CO	NCERI	NS (Include De.)			100.0%	+		100.0%
_	WOMEN-OWNED SMALL BUSINESS (Dollar Amount and Percent of TOC.)	MOS	B) CONCERNS		\neg		1		
	HISTORICALLY BLACK COLLEGES A (HBCU) AND MINORITY INSTITUTIO (Dollar Amount and Parcent of 10c.)	ND UN	HVERSITIES I III applicablei						
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AUTHORIZED FOR LOCAL REPRODUCTION

STANDARD FORM 294 (REV. 10-7000) Proceeding by GSA-FAR (48 CFR) 53 219(4)

GENERAL INSTRUCTIONS

- 1. This report is not required from small businesses.
- 2. This report is not required for commercial items for which a commercial pion has been approved, nor from large businesses in the Operatment of Defense (DCO) Test: Peogreen for Repositions of Comprehensive Extraordiscip Finns. The Summary Subcontest Report (SF 295) is required for contractors operating under one of less two combines and should be submitted to the Government in accordance with the instructions on that form.
- 3. This form cellects subcontract award data from prima contractor/subcontractors that: (a) half one or more contracts even 1500,000 (lever \$1,000,000 (see senaturation of a public feelifely); and (s) or sequence (see senaturation of a public feelifely); and (s) or sequence (see senaturation of a public feelifely; and (s) or sequence (see senaturation). The senaturation of senatu
- for interesty interestures (1991).

 This report is required for each contract containing a subcontracting plen and must be submitted to the administrative centracting efficient for ACO is essigned, semi-annually during centract performance for the provide indeed March 31st and September 30th. A separate rate is regulated for sech centract at centract completion. Reports are due 30 days after the close of each reporting period unless otherwise directed by the centracting officer. Reports are required when thus, regardless of whether there has been any authoriterating occurry alone the inapplies of the centract or oline the provides report.
- Only subcontracts involving performance within the U.S., its possessions, Pueric Rice, and the Trust Territory of the Pacific Islands should be included in this report.
- 6. Purchases from a corporation, company, or subdivision that is an affiliate of the primoleubcontractor are <u>not</u> included in this report.
- 7 Subcontract award data reported on this form by point contracters/subcontracters shall be limited to awards made to their immediate subcontracters. Credit <u>sprintly</u> be taken for awards made to lower tier subcontracters.

SPECIFIC INSTRUCTIONS

- BLOCK 2: For the Centractor Identification Number, enter the number Data Universal Numbering System (DUNS) number that dentified the specific contractor establishment. If there is no DUNS indicated that specific contractor establishment. If there is no DUNS indicated that the specific sent name and address entered indicated that the specific sent number of the spe
- BLOCK 4: Check only one. Note that all subcontract award date reparted on the form represents activity since the inexposen of the contract through the date indicated in this block.
- BLOCK 5: Check whether this report is a "Reguler," "Final," and/or "Revised" report. A "Final" report should be checked only if the contractor has completed the contract or subcontract reported in Block. 7. A "Revised" report is a change to a report previously submitted for the name parent.
- BLOCK 6: Identify the department or agency administering the majority of subcontracting plans.
- BLOCK 7: Indicate whether the reporting contractor is submitting this report as a prime contractor or subcontractor and the prime contract or subcontract number.
- BLOCK 8. Enter the name and address of the Federal department or agency ewerding the contract or the point contractor awarding the
- 8LOCK 9: Check the appropriate black to indicate whether indirect costs are included in the delar amounts in bleaks 10e through 14. The rehurs comparable to between the peed and actual columns, the contractor may include indirect costs in the actual columns only if the subconfracting plan included indirect costs in the goal.

- BLOCKS 10a through 15: Under "Current Gool," enter the dollar and parcent goals in each category (SS, SDS, WOSS, VOSS, and HABZene SS, From the category (SS, SDS, WOSS, VOSS, and HABZene SS, From the category of the catego
- BLOCK 10s: Report all subcontracts ewerded to S8s including subcontracts to \$00s. WOS8s, VOS8s and MU8Zone S8s. For DDD. NASA, and Coest Guesé contracts, include subcontracting swards to NBCUs and Mile.
- BLOCK 10b; Report all subcontracts ewarded to large businesses (LSet.
- BLOCK 19c: Report on this line the total of all subcontracts awarded under this contract (the sum of lines 10s and 10b).
- BLOCKS 11 through 15: Each of these items is a subcategory of Bock 10c. Note that in some cases the same delars may be reported to more than one block (s. g., SDBs awned by women or veterane).
- SLOCK 11: Report all subcontracts awarded to SDEs lineuting women-owned, reteran-owned, and MUEZone SE SDEs). For OOD, NASA, and Coast Guard contracts, (todasts subcontract awards to MECUs and Mis.
- BLOCK 12: Report all subcontracts awarded to Women-Owned films (including SDSs, VOSS's, and HUSZene SSs awned b
- BLOCK 13 for contracts with DeD, NASA, and Ceast Guardi: Report all subcontracts with HBCUsANts. Complete the column under "Current Geol" only when the subcontracting plan establishes
- BLOCK 14: Report all subcontracts awarded to HUBZene SBs Encluding warmen-award, veteran-award, and SDB HUBZene SBs)
- BLOCK 15: Report all subcontracts awarded to VOSBs including Sente-Disabled VOSBs lindled VOSBs that are also SDBs. WOSBs and MURZono SBs.).
- BLOCK 16: Enter a short nerrotive explenemen if fall 58. SDB. WOSB, or MUBZene 58 accomplishments fall brigw that which would be apported using a streight-line projection of poels through the period of contract performance: or (b) if this is a final report, sny one of the three goals was not met.

DEFINITIONS

- 1. Direct Subcontract Awards are these that are identified with the parlemence of one or more specific Government contract(s)
- Induses casts are these which, because of incurrence for common or joint purposes, are not identified with specific Government contracts: the swreds are related to Government sontracts performance but remain for adocusion after direct awards have been determined and identified to specific Government contracts.

DISTRIBUTION OF THIS REPORT

For the Awarding Agency or Contractor:

The original copy of this report should be provided to the contracting efficer at the agency or contractor identified in Block 2. For contracts with DOD, a copy should also be provided to the Delense Legislance Agency OLA1 at the experient Delense Contract Managament Area Operations (DCMA C) effice.

For the Small Business Administration (SBA):

A capy of this report must be provided to the cognizant Commenced Market Representative (CMR) at the time of a compliance renew. It is NOT necessary to mad the SF 234 to SBA unless specifically requested by the CMR.

STANDARD FORM 294 MEV 10-2000 BACK

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Ob.	LARGE BUSINESS CONCERNS (Dolla	Y An	nount i	and Perc	ent of 10	k.	.)						
0c	TOTAL (Sum of 10s and 10s.)												100.0%
1.	SMALL DISADVANTAGED (SDB) CO. (Dollar Amount and Percent of 10c.)												100.0%
2.	WOMEN-OWNED SMALL BUSINESS (Dollar Amount and Percent of 10c.)											_	i —
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STANDARD FORM 235 IREV 10 20001 Processed by GSA - FAR ING CFR) 53 21911

GENERAL INSTRUCTIONS

- This report is not required from small busin
- The report must be belongfied comb annually (for the siz menths at and the treate menths ended Suptember 30m) for control fortunat (2001) belones (2000) demonstry (for the treate menths of the size of the streate of the size of the si
- 5. If a prime contractarbuleansqueter is performing went for me Federal expense, a measure report shed to exhausted to each agency that agency contracts, provided of based our of that opense's contract, provided of based our of that opense's contract to the contract of a public realized, and the contract realized or contractarbune of a public realized or instruction of a public realized or instruction of the public realized or instruction of the public realized or instruction.
- For DOD, a commendated report should be understood for all contracts are not by unitary departmental agencies and/or exhaustions are under exhaustion. The contraction. Neversoon DOD commissions and incommendate and experience report for each DOD component.
- Only subcontracts involving performance within the U.S., its possessions, ris Rice, and the Trust Territory of the Posific Islands should be included a
- 8 Purchases from a corporation, company, or conditions that is an affiliate of the paradysubcontractor are <u>net</u> included in this report.
- Subcontract amend date reported on this form by prime contractors shed be limited to awards made to steel immediate subcontractors. Credit (Intel) be taken for awards made to live immediate subcontractors. Credit (Intel) be taken for awards made to lower dor subcontractors.
- 10 See special instructions in right-hand column for Commercial Plans.

SPECIFIC INSTRUCTIONS

A CAC 2: For the Controller Monthlighton Number, once the nine-digit Data Universital Humburney System (DURE) member that identifies the operfit restriction activation once. If there is no QUMS number available that identifies restriction name. If there is no QUMS number available that identifies an arrange of the second of the second State 1, once the second State 1,

BLOCK 4: Check only one. Note that March 31 seprecents the six mostly October 1st and that September 30th represents the twolve months from Oc 1st Enter the year of the reporting ported.

SLOCK 6: Chesh whether this report is a "Requier." "Finel," order "Resused" resert. A "Rea" report should be altested only if the continuite has completed as the contracts containing substantiated gather severated by the spency is which the same parent. A "Resused" report is a sharing to a report provinciesly solutions.

SLOCK 8: Mentily the department or agency edim rubcontracting plane

BLOCK 7: The report orenemposess of contracts with the Federal Government for the opening to which it is enterwised, including subcontracts resolved from other rings businesses that have constructs with the same opening, suddening in the latest whether the contractor is a given opening to well opening or both federal only

BLOCE 8: Chesh only one. Chock "Commercial Plan" only if the report is under on operawid Commercial Plan. For a Commercial Plan, the contraster must receive the parameteps of dedices in Black to the Enteroph 16th confidentials to the operaw in when this report is being submitted.

SLOCK 9 Monkey the imper product or service lines of the reporting argentetion.

84.0E13 (On through 164: These mines showed include all subcontract emerge resulting from contracts or subcontracts, regardless of delice amount, receiver time the agency to which this report is submitted. It reports on the subcontractor, report at subcontractor, amounts of subcontractor, report at subcontractor amounts of subcontractor.

SLOCK 10c: Report of subcontrasts awarded to 38c including subcontracts to SOBs, WOSBs, who MUSE are \$8. For DOD, NASA, and Cases Guard contracts, include subcontracting swants to MSCLIc and Ms.

BLOCK 100: Report of submonutents awarded to large businesses (LBs)

BLOCK 10c; Report on this line the grand total of aubcontracts line sum of fines 10c and 10c).

8.0CKE 11 through 150; Each of these frame is a subscringery of Brest 10s. Note that in some score the same delate may be reported in more than one Mash inc., 500e owned by wasness; Bleenton unknownesses to HBCUs or Mile should be reported on both Black 11 and 13.

8LOCK 11: Report of subsensests awarded to SDBs including warman-owned, unforce-owned, and MURZane SB 308:1. For DOO, HASA, and Cases Quart contracts, balance subsensest awards to HBCUs and Mili

BLOCK 12: Report of subsenerate provided to WOSB firms (including SOB) WOSBs, and HUSCone SBs owned by warrant.

BLOCK 12: For contrasts with DOC, MASA, and Coast Quart): Enter the data

BLOCK 14: Report at subcontracts awarded to MUBZene Sts. Including warran-guined, veterbn-gwined, and 508 MUBZene Sts.).

BLOCK15s: Report of subcontracts overded to VOSS4 including warmen-sumed, SDR, and HUSZeno SS VOSS4.

BLOCK 15b; Aspert of subcontrasts awarded to service disabled VOSBs (these subcontrasts about disable be reserved in Book 15a).

SPECIAL MISTRUCTIONS FOR COMMERCIAL PLANS

- 1. This report is due on Oktober 30th each year for the previous listed year ended September 30th.
- The annual report submitted by reporting organizations that have an operand someten-made annual subcontenting them has communical items that include at subcontenting activity under communical fairless during the year and shall be submitted in addition to the regulate reports for exhibiting communication from the production of the communication of the communication of the beautiful organization.
- 3. Enter in Blacks 10s strength 15s the total of all subcontract awards under the contractor's Communical Pars. Shows in Black II the passworkings of IVIs start that is excluded by the agency to which the report is being alleger. The report administration is easy agency from which contracts for Communical Resistance of the species of Communical Resistance received.

OEFFRITIONS

- Direct Subseniers: Awards are these that are identified with the performance of one or more specific Government contrasts.)
- 2. Induses Subcontest Awards on those which, because of neurone re-commen or jobs purposes, one not identified with specific Government contracts. Mose threats are related set Government senting performance but comment absorbing of the comments of the contract of the c

SUMMITTAL ADDRESSES FOR ORIGINAL REPORT

- For DOD Contractors, panel reports to the engineeric contract administration affice as stated in the energies.
- For Civilian Agency Contractors, send reports to awarding agency.
- MASA: Forward reports to MASA, Office of Productional (MS)
 Weshington, DC 20546
- OTHER FEDERAL DEPARTMENTS OR AGENCES: Forward report to the OSDBU Decemer unless otherwise provided reu in International by the Department or Agency.

FOR ALL CONTRACTORS:

SMALL BUSINESS ADMINISTRATION (SBAL: Song "Into copy" to the copyright Commissed Market Representance (Close at the address previded by SBA. Call SBA Meedbusters in Weshington, DC at (202) 205-6475 for certact address of